PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

Under the Paperwork Reduction Act of 1995, no persons are req	uired to re		n of information unless it displays a valid OMB control number				
UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No.		492322016500				
	First II	nventor	Kiyoshi YONEDA				
	Title	ELECTROLUMINESCENT DISPLAY DEVICE					
(Only for new nonprovisional applications under 37 CFR 1.53(b))	<u> </u>	1					

(0)					" Expre.	ss Ma	il Label	No.						
See MPE	APPLICATION ELEMENTS MPEP chapter 600 concerning utility patent application contents.							MS Patent Application ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. X Specification [Total Pages 9] Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention								ii. Paper es ARTS t(s)) ver of orney of IDS s						
6. X	6. X Application Data Sheet. See 37 CFR 1.76													
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.														
				19. C	ORRESPO	NDE	NCE A	DDRE	SS					
X	Custome	r Number:		2522	27			OR		Correspo	nden	ce address b	pelow	
Name														
Address														
City	ty State									Zip Code				
Country Telephone										Fé	x			
Name (Print/Type) Barry E Bretschneider Registration No. (Attorney/Agent) 28,055								,						
Signature Allante									Date		rch 2, 20	04		